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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	10/709,393-Conf. #3392
				Filing Date	April 30, 2004
				First Named Inventor	David M. Williams
				Art Unit	2426
				Examiner Name	M. I. Alam
Sheet	1	of	1	Attorney Docket Number	57429-8005.US01

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
	AA	US-6,763,371	07-13-2004	Jandel	
	AB	US-20040267812	12-30-2004	Harris et al.	
	AC	US-20050177624	08-11-2005	Williams et al.	
	AD	US-20050177745	08-11-2005	Oswald et al.	
	AE	US-20060095792	05-04-2006	Hurtado et al.	
	AF	US-7,047,406	05-16-2006	Schleicher et al.	
	AG	US-7,310,679	12-18-2007	Doyle	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ⁶
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)				

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

Examiner Signature		Date Considered	
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